

# Work Order ID 98903

\*98903\*

Page 1

March-28-13 10:42:48 AM

Item ID: D3574-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Cabin Floor Protector  
 Start Date: 4/01/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 4/01/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: MLS Date: 13-04-01 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3574	Rev B								
100		0.00							
<b>*100*</b>	FLOW WATER JET								
Waterjet	Memo	0.00							
FLOW CNC Waterjet	1-Cut as per Dwg D3574 Dwg Rev: <u>B</u> Prog Rev <u>B</u> 2- Deburr if necessary								
110		0.00							
<b>*110*</b>	QC2- Inspect parts off machine FAI/FAIB								
QC	Memo	0.00							
Quality Control									
120		0.00							
<b>*120*</b>	QC8- Inspect parts - second check								
QC	Memo	0.00							
Quality Control									

*Handwritten:* DAS 27 154.9

*Handwritten:* 1 0 JM13-4-8  
 1 0 JM13-4-8  
 1

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <div style="display: flex;"> <div style="flex: 1;"> <input type="checkbox"/> Bend  <input type="checkbox"/> BOM/Route  <input type="checkbox"/> Broken/Damaged  <input type="checkbox"/> Burrs  <input type="checkbox"/> Contamination  <input type="checkbox"/> Countersink  <input type="checkbox"/> Cut Too Short  <input type="checkbox"/> Drill Holes  <input type="checkbox"/> Drawing  <input type="checkbox"/> Finish  <input type="checkbox"/> Folio           </div> <div style="flex: 1;"> <input type="checkbox"/> Grain  <input type="checkbox"/> Hardware  <input type="checkbox"/> Inspection Incomplete  <input type="checkbox"/> Instructions Incomplete/Unclear  <input type="checkbox"/> Maintenance  <input type="checkbox"/> Mislabeled  <input type="checkbox"/> Misread  <input type="checkbox"/> Offset  <input type="checkbox"/> Out of Calibration  <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions           </div> <div style="flex: 1;"> <input type="checkbox"/> Ovalized  <input type="checkbox"/> Over/Under tolerance  <input type="checkbox"/> Part Incorrect  <input type="checkbox"/> Part Lost/Missing  <input type="checkbox"/> Part Moved  <input type="checkbox"/> Positioned Wrong  <input type="checkbox"/> Power Loss/Surge    <input type="checkbox"/> Pressure/Forced  <input type="checkbox"/> Temperature/Cure  <input type="checkbox"/> Weld  <input type="checkbox"/> Wrong Stock Pulled    <input type="checkbox"/> Other           </div> </div>							

# Work Order ID 98903

\*98903\*

Page 2

March-28-13 10:42:48 AM

Item ID: D3574-1 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Cabin Floor Protector  
 Start Date: 4/01/13 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 4/01/13 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* Small Fab Small Fab	Small Fab Memo Deburr if necessary.	0.00 0.00							
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00							
150 *150* Packaging Packaging	Identify as per dwg & Stock Location: _____ Memo	0.00 0.00							

W/A  
SMD

4/3/13 (1)

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 98903****\*98903\***

Page 3

March-28-13 10:42:48 AM

Item ID: D3574-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Cabin Floor Protector

Start Date: 4/01/13

Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 4/01/13

Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

160

QC21- Final Inspection - Work Order Release

0.00

**\*160\***

QC

Memo

0.00

Quality Control

13/5/6 JF  
ME

13-4-29

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

March-28-13 10:42:47 AM

Page 1

Work Order ID: 98903

Parent Item: D3574-1

Parent Item Name: Cabin Floor Protector

Start Date: 4/01/13

Required Date: 4/01/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev :A New Issue 07-01-22 EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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MLEXS.125-F60029-04

Purchased

No

sf

2,205.4040

33,616,808

32

Jm 13- 4-8

GE PLASTICS LEXAN SHEET

Location

Loc Qty

Loc Code

MAT018

2205.404

124654

541.404

124866

1664

124654

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	98903
<b>Description:</b> Cabin Floor Protector		<b>Part Number:</b>	D3574-1
<b>Inspection Dwg:</b> D3574	<b>Rev:</b> B	<b>Page 1 of 2</b>	

### FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☐ Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø3.00	+0.006/-0.001	3.002"	-		V	Jkmo1
7.37	+/-0.030	7.37"	-		V	
10.75	+/-0.030	10.75"	-		V	Producers
11.00	+/-0.030	11.00"	-		V	
15.25	+/-0.030	15.25"	-		T	Jkmo6
25.87	+/-0.030	25.87"	-		T	
39.75	+/-0.030	39.75"	-		T	
44.75	+/-0.030	44.75"	-		T	
49.11	+/-0.030	49.11"	-		T	
51.11	+/-0.030	51.11"	-		T	
53.51	+/-0.030	53.51"	-		T	
63.50	+/-0.030	63.50"	-		T	
65.25	+/-0.030	65.25"	-		T	
10.75	+/-0.030	10.75"	-		V	
11.06	+/-0.030	11.06"	-		V	
14.75	+/-0.030	14.75"	-		T	
25.50	+/-0.030	25.50"	-		T	
25.75	+/-0.030	25.75"	-		T	
26.00	+/-0.030	26.00"	-		T	
32.87	+/-0.030	32.87"	-		T	
38.81	+/-0.030	38.81"	-		T	
44.75	+/-0.030	44.75"	-		T	
45.00	+/-0.030	45.00"	-		T	
48.25	+/-0.030	48.25"	-		T	
58.38	+/-0.030	58.38"	-		T	
61.25	+/-0.030	61.25"	-		T	
64.13	+/-0.030	64.13"	-		T	
64.63	+/-0.030	64.63"	-		T	
66.50	+/-0.030	66.50"	-		T	
7.50	+/-0.030	7.50"	-		V	
9.50	+/-0.030	9.50"	-		V	
10.38	+/-0.030	10.38"	-		V	
10.88	+/-0.030	10.88"	-		V	
14.50	+/-0.030	14.50"	-		T	

<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	98903
<b>Description:</b> Cabin Floor Protector		<b>Part Number:</b>	D3574-1
<b>Inspection Dwg:</b> D3574	<b>Rev:</b> B	<b>Page 2 of 2</b>	

### FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☐ Prototype

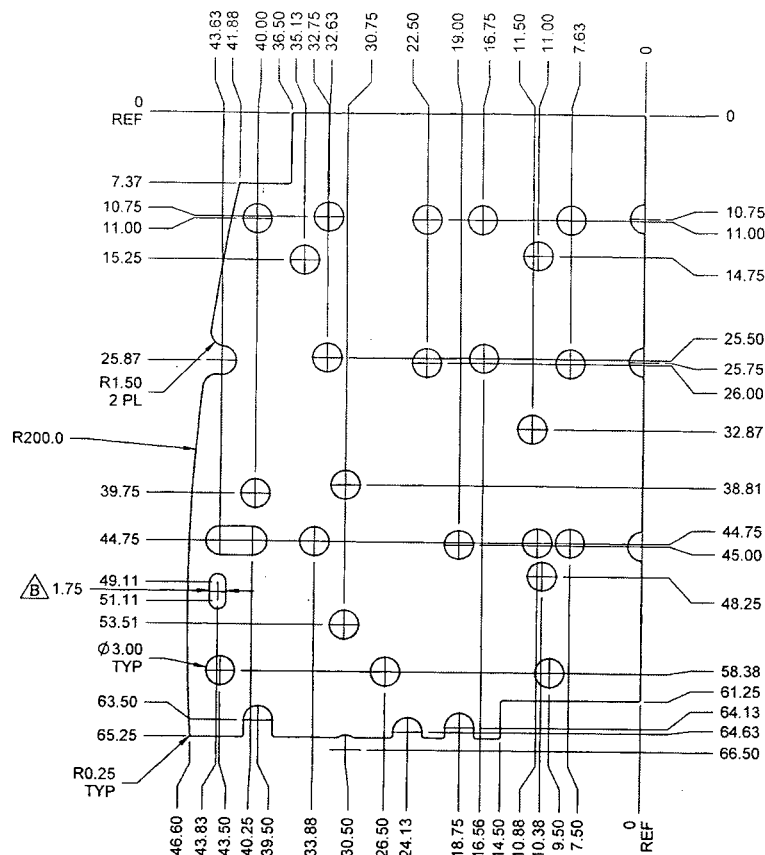
Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
16.56	+/-0.030	16.56"	-		T	
18.75	+/-0.030	18.75"	-		T	
24.13	+/-0.030	24.13"	-		T	
26.50	+/-0.030	26.50"	-		T	
30.50	+/-0.030	30.50"	-		T	
33.88	+/-0.030	33.88"	-		T	
39.50	+/-0.030	39.50"	-		T	
40.25	+/-0.030	40.25"	-		T	
43.50	+/-0.030	43.50"	-		T	
43.83	+/-0.030	43.83"	-		T	
46.60	+/-0.030	46.60"	-		T	
7.63	+/-0.030	7.63"	-		T	
11.00	+/-0.030	11.00"	-		T	
11.50	+/-0.030	11.50"	-		T	
16.75	+/-0.030	16.75"	-		T	
19.00	+/-0.030	19.00"	-		T	
22.50	+/-0.030	22.50"	-		T	
30.75	+/-0.030	30.75"	-		T	
32.63	+/-0.030	32.63"	-		T	
32.75	+/-0.030	32.75"	-		T	
35.13	+/-0.030	35.13"	-		T	
36.50	+/-0.030	36.50"	-		T	
40.00	+/-0.030	40.00"	-		T	
41.88	+/-0.030	41.88"	-		T	
43.63	+/-0.030	43.63"	-		T	
0.125	+/-0.010	0.126"			V	

<b>Measured by:</b>	Jn
<b>Date:</b>	13-4-8

<b>Audited by:</b>	27
<b>Date:</b>	13 4 9

<b>Prototype Approval:</b>	N/A
<b>Date:</b>	N/A

Rev	Date	Change	Revised by	Approved
A	08.02.28	New Issue	KJ/DD	
B	08.07.31	47.75 dimension removed	KJ/DD	
C	09.05.15	Dimensions updated per Dwg Rev B	KJ	



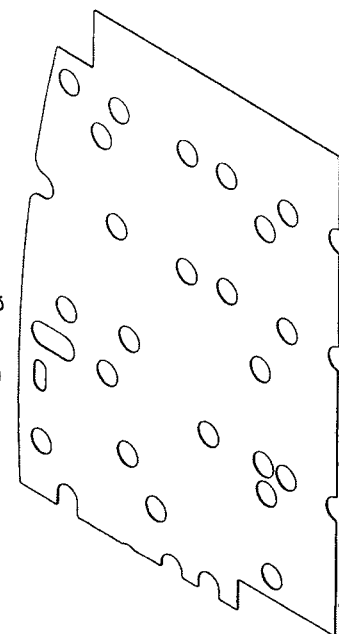
### D3574-1 CABIN FLOOR PROTECTOR

#### NOTES:

- 1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE), 0.125 THICK, TEXTURED SIDE UP, (REF DART SPEC MLEXS.125-F60029-04)
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3574-1" AND B/N USING FINE POINT PERMANENT INK MARKER ON SMOOTH SIDE OF PART
- 7) WEIGHT: 14.30 lbs
- 8) CHECK PER TEMPLATE DT8961

B	ADD CUT-OUT TO -1/4" FOR WEIGHT AND BALANCE DATA PLATE ZN B7-1, B8-5; -2 NOW SHOWN ON SHEET 2	09.03.25
A	NEW ISSUE	07.06.08
REV.	DESCRIPTION	BY DATE
DESIGN		
DRAWN		
CHECKED		
MFG. APPR.		
APPROVED		
DE APPR.		
DATE	09.03.25	

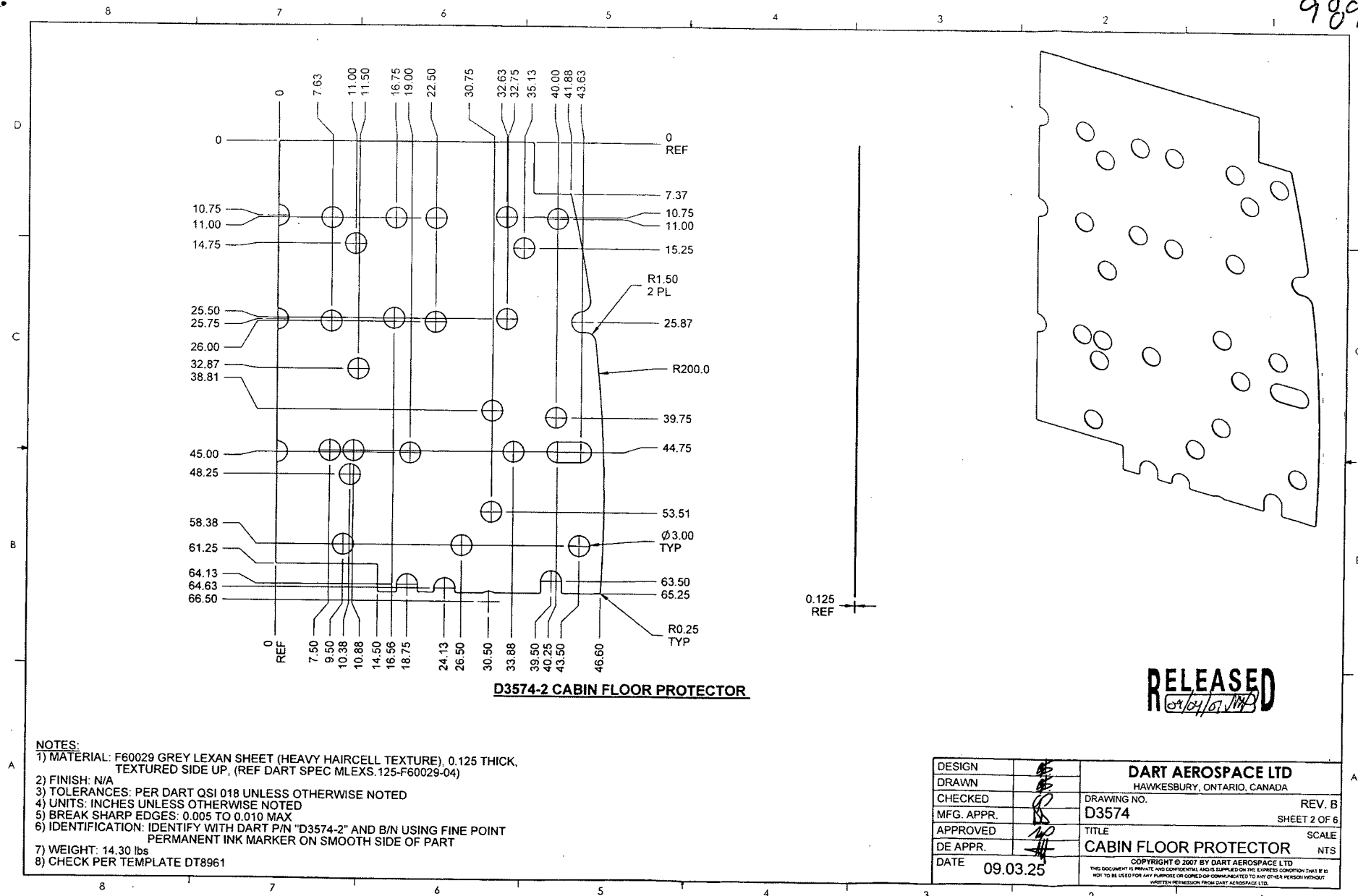
<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. <b>D3574</b>	REV: B SHEET 1 OF 6
TITLE <b>CABIN FLOOR PROTECTOR</b>	SCALE NTS
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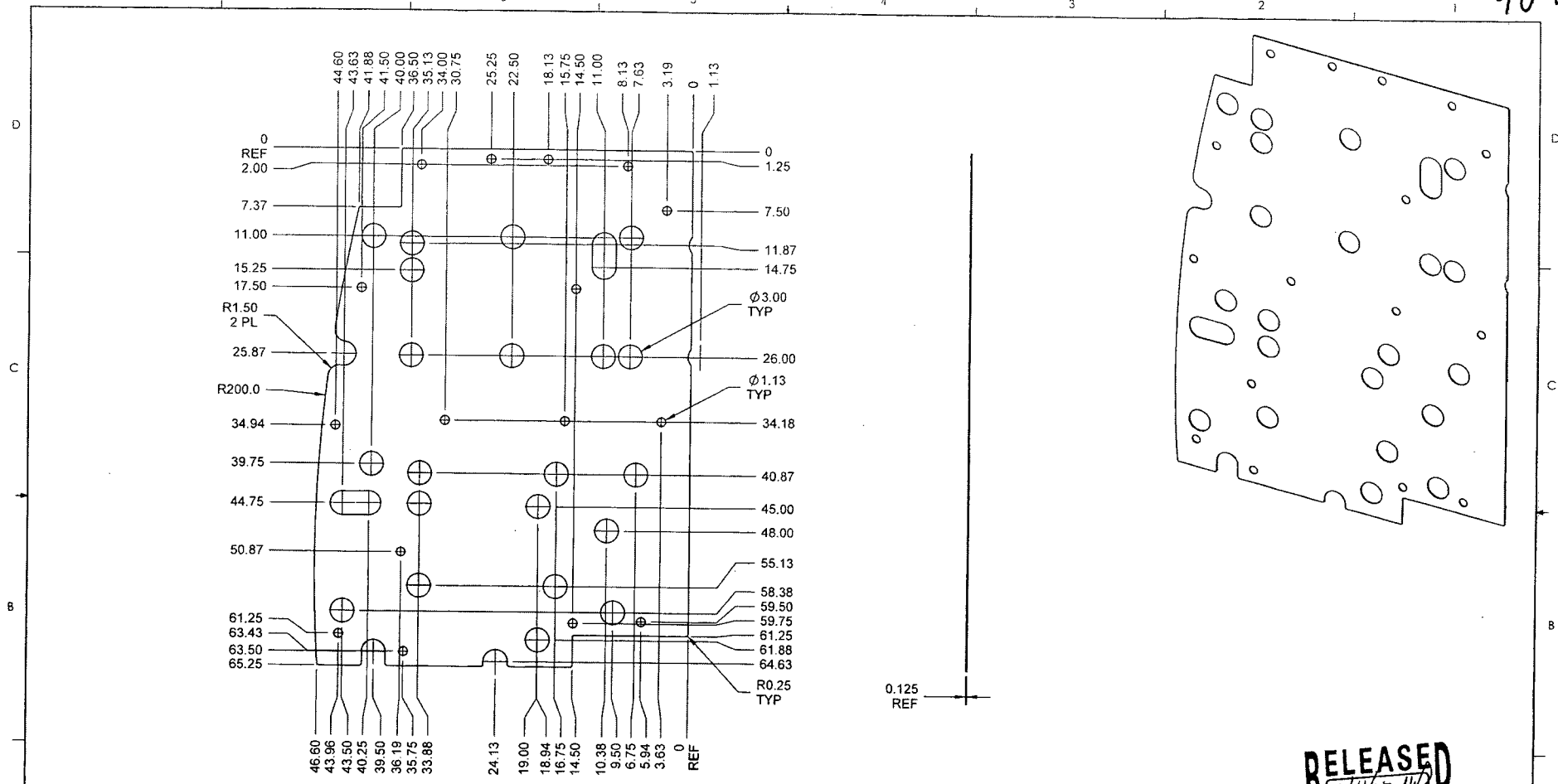


**NOTES:**

- 1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE), 0.125 THICK, TEXTURED SIDE UP, (REF DART SPEC MLEXS.125-F60029-04)
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3574-2" AND B/N USING FINE POINT PERMANENT INK MARKER ON SMOOTH SIDE OF PART
- 7) WEIGHT: 14.30 lbs
- 8) CHECK PER TEMPLATE DT8961

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MFG. APPR.		<b>D3574</b>	SHEET 2 OF 6
APPROVED		TITLE	SCALE
DE APPR.		<b>CABIN FLOOR PROTECTOR</b>	NTS
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**D3574-3 CABIN FLOOR PROTECTOR**

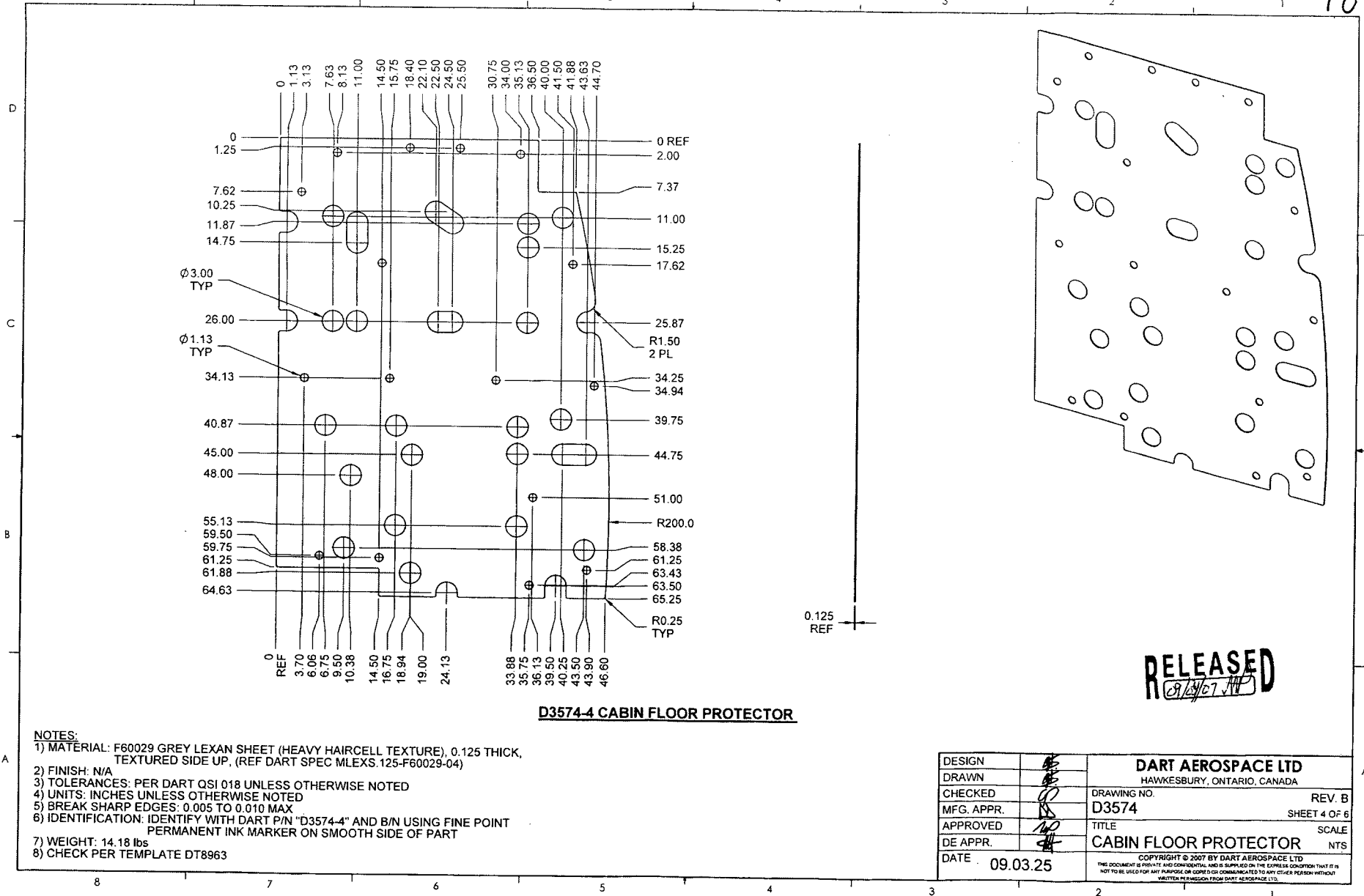
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**NOTES:**

- 1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE), 0.125 THICK, TEXTURED SIDE UP, (REF DART SPEC MLEXS. 125-F60029-04)
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART OSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3574-3" AND B/N USING FINE POINT PERMANENT INK MARKER ON SMOOTH SIDE OF PART
- 7) WEIGHT: 14.33 lbs
- 8) CHECK PER TEMPLATE DT8962

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APPROVED		TITLE	SCALE
DE APPR.		<b>CABIN FLOOR PROTECTOR</b>	NTS
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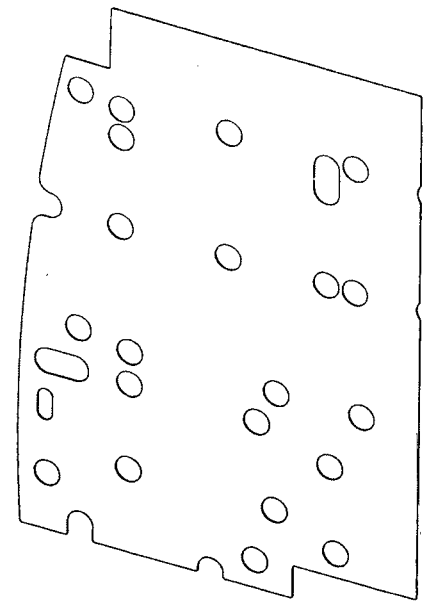
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- NOTES:**
- 1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE), 0.125 THICK, TEXTURED SIDE UP, (REF DART SPEC MLEXS.125-F60029-04)
  - 2) FINISH: N/A
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3574-4" AND B/N USING FINE POINT PERMANENT INK MARKER ON SMOOTH SIDE OF PART
  - 7) WEIGHT: 14.18 lbs
  - 8) CHECK PER TEMPLATE DT8963

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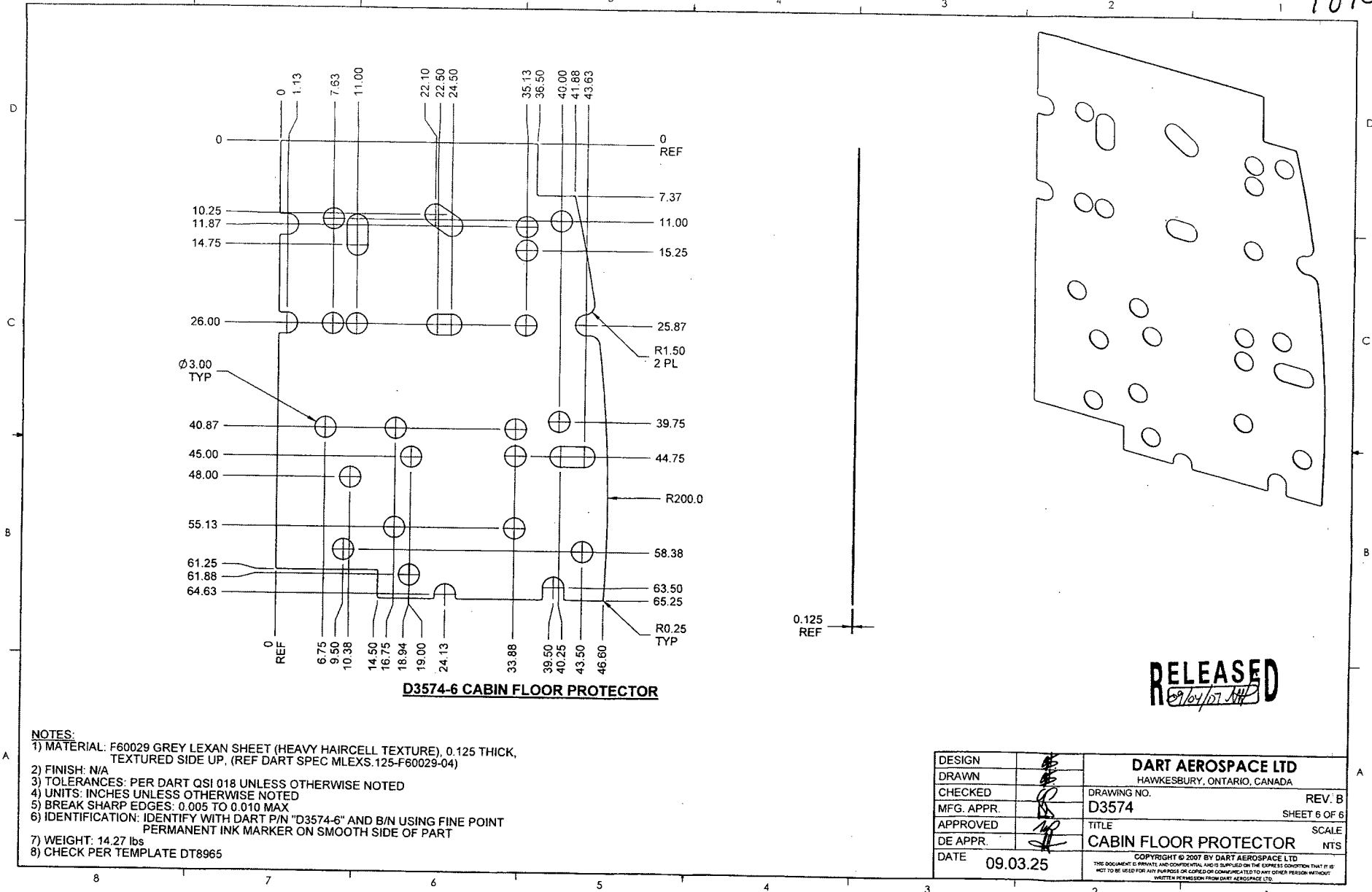


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NOTES:  
1) MATE

- |   |                    |                              |              |
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| DRAWN   | <i>[Signature]</i> | HAWKESBURY, ONTARIO, CANADA  |              |
| CHECKED   | <i>[Signature]</i> | DRAWING NO.                  | REV. B       |
| MFG. APPR.  | <i>[Signature]</i> | D3574                        | SHEET 5 OF 6 |
| APPROVED  | <i>[Signature]</i> | TITLE                        | SCALE        |
| DE APPR.  | <i>[Signature]</i> | <b>CABIN FLOOR PROTECTOR</b> |              |
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MFG. APPR.		D3574	SHEET 6 OF 6
APPROVED		TITLE	SCALE
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